

MJ:mj 03/04/04 259370  
PATENT



Attorney Reference Number 245-53435  
Application Number 09/558,138

#10/a

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

**In re application of:** Koç et al.

**Application No.** 09/558,138

**Filed:** April 25, 2000

**Confirmation No.** 9299

**For:** CRYPTOGRAPHIC METHODS AND  
APPARATUS USING WORD-WISE  
MONTGOMERY MULTIPLICATION

**Examiner:** Joseph M. McArdle

**Art Unit:** 2132

**Attorney Reference No.** 245-53435

CERTIFICATE OF MAILING

I hereby certify that this paper and the documents referred to as being attached or enclosed herewith are being deposited with the United States Postal Service as First Class Mail in an envelope addressed to: COMMISSIONER FOR PATENTS, P.O. BOX 1450, ALEXANDRIA, VA 22313-1450 on the date shown below.

Attorney  
for Applicant(s)

Date Mailed March 4, 2004

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AMENDMENT

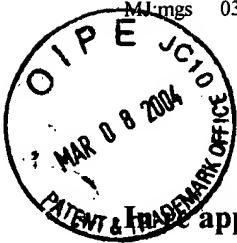
This responds to the Office action dated December 4, 2003. Please amend the referenced application as follows:

**Amendments to the Claims** are reflected in the listing of claims, which begins on page 2.

**Remarks** begin on page 8.

2132/B

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*[Signature]*

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TRANSMITTAL LETTER

Enclosed is an Amendment for the above application. The fee has been calculated as shown below.

CLAIMS AS AMENDED					
For	No. after amendment	No. paid for previously	Present Extra	Rate	Fee
Total Claims	18	- 21*	= 0	\$9.00	\$ 0.00
Indep. Claims	11	- 8**	= 3	\$43.00	\$ 129.00
Mult. Dep. Claims Fee (if not previously paid)				\$145.00	
One-month Extension of Time				\$55.00	
Two-month Extension of Time				\$210.00	
Three-month Extension of Time				\$475.00	
TOTAL ADDITIONAL FEE FOR THIS AMENDMENT					\$129.00

\* greater of twenty or number for which fee has been paid.


\*\* greater of three or number for which fee has been paid.

☒ If an extension of time is required please consider this a petition therefor.

- ☒ A check in the amount of \$129.00 is attached.
- ☒ Please charge any additional fees that may be required in connection with filing this amendment and any extension of time, or credit any overpayment, to Deposit Account No. 02-4550. A copy of this sheet is enclosed.
- ☒ Please return the enclosed postcard to confirm that the items listed above have been received.

Respectfully submitted,

KLARQUIST SPARKMAN, LLP

By   
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cc: Docketing